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SAN DIEGO, C.	A 92130-2040		0	Germain		(Depositor's name)	
			No	LUNUIN BAN	An)	(Signature)	
				ebruary		(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/568,111 TITLE OF INVENTION	07/13/2006 : POLYSIALIC ACID I		Dale Howard Hreczuk-Hirs		<del>429022001300</del> 677492000600	6287	
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE TOTAL FEE(S) DU	E DATE DUE	
nonprovisional	NO	\$1510	\$300	\$0	\$1810	02/16/2010	
EXAM	INER	ART UNIT	CLASS-SUBCLASS				
OLSON	I, ERIC	1623	514-049000				
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Please check the appropr	iate assignee category o					group entity Government	
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5. Change in Entity Sta	- CMALL ENTITY ctof	his See 37 CFR 1 27.	☐ b. Applicant is no lon	ger claiming SMA	LL ENTITY status. See 37	CFR 1.27(g)(2).	
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Authorized Signature	/Kate H. M	urashige/		Date F		2010	
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25225

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(Depositor's name)	Sarda	( Germaine
(Signature)	(n)	Secular French
(Date)	6, 2010	February 1

A DRIVE A TION NO	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
APPLICATION NO. 10/568,111	07/13/2006		Dale Howard Hreczuk-Hirs	t ,	<del>429022001300</del> 677492000600	6287	
TITLE OF INVENTION	POLYSIALIC ACID I	DERIVATIVES			677432000000		
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APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU			
nonprovisional	ОИ	\$1510	\$300	<b>\$</b> 0	\$1810	02/16/2010	
EXAMINER		ART UNIT	CLASS-SUBCLASS			•	
OLSON, ERIC		1623	514-049000	·			
"Fee Address" indi PTO/SB/47; Rev 03-0 Number is required.	ondence address (or Cha 3/122) attached. ication (or "Fee Address 2 or more recent) attact	nge of Correspondence "Indication form and. Use of a Customer	2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
PLEASE NOTE: Uni recordation as set forti (A) NAME OF ASSIG	ess an assignee is ident h in 37 CFR 3.11. Com	ified below, no assignee pletion of this form is NO	(B) RESIDENCE: (CIT	atent. It an assign assignment.  'and STATE OR (		document has been fried to:	
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5. Change in Entity Stat			Dh. Annlieset is no lon	ger claiming SMA	LL ENTITY status. See 37	CFR 1.27(g)(2).	
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Typed or printed name	Kate H. M	urashiqe		Registration 1			
This collection of inform	ation is required by 37 (	FR 1.311. The informati	on is required to obtain or	retain a benefit by timated to take 12	the public which is to file (a minutes to complete, include	nd by the USPTO to process ling gathering, preparing, and	

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